

OFFICE & EXPRESS MAIL ADDRESS

633 N Fourth Street Boise, ID 83702

MAILING ADDRESS

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(208) 334-3285 Toll Free (866) 447-5411

Telecommunications Relay System (TRS)

(800) 377-3529



**State of Idaho
Real Estate Commission**

Commission Use Only

License # _____
Date Filed _____
Date Effective _____
Receipt # _____

Alternate License Renewal Application

Read this entire application before completing the form. You must provide all information requested and enclose the required fee of \$200. Late Renewals must include the \$25 late fee for a total of \$225.

RECIPROCAL LICENSEES must also include a copy of your current active license from your primary state of licensure.

ACTIVE LATE RENEWAL must complete and enclose the "Affidavit" or "Late License Renewal Agreement" with this form.

1. Name: _____ 2. Social Security # _____
Last First Middle
3. Personal Address: _____
4. Home Phone: _____ 5. Cell Phone: _____
6. E-mail Address: _____
7. Have you been issued any criminal, civil, or administrative judgment or order that you are required to report under sections 54-2062 or 54-2063, Idaho Code? ☐ Yes (Attach explanation) ☐ NO
8. I am renewing my license as: ☐ Active (Complete the next Section) ☐ Inactive

FOR ACTIVE LICENSEES ONLY

1. Brokerage Name: _____
2. Business Phone: _____ 3. E-mail address: _____
4. Business Address: _____
5. Business Mailing Address: _____
6. Designated Brokers include a list of licensees associated with your office.
7. Brokerage Type: ☐ LLC ☐ Corporation ☐ LLP ☐ Limited Partnership ☐ Sole Proprietorship
(An additional \$100 renewal fee, plus a \$25 late fee if renewing late, is required for all companies except Sole Proprietorships)

☐ **YES** ☐ **NO** I certify that I have completed the Continuing Education requirements under section 54-2023 and I further understand that penalties will be imposed by section 54-2059, Idaho Code, for violations under section 54-2060, Idaho Code, for the use of fraud, deception, misrepresentation, misstatement or any unlawful means in applying for or securing a license to act as a real estate broker or salesperson. I agree to furnish sufficient evidence of having completed the required Continuing Education requirements upon request by the Commission.

☐ **YES** ☐ **NO** I certify that I have Errors & Omission (E&O) insurance as required under section 54-2013 and I further understand that penalties will be imposed by section 54-2059, Idaho Code, for violations under section 54-2060, Idaho Code, for the use of fraud, deception, misrepresentation, misstatement or any unlawful means in applying for or securing a license to act as a real estate broker or salesperson. I am aware that I must maintain E&O insurance to be actively licensed in the state of Idaho. I agree to furnish sufficient evidence of having Errors & Omission insurance upon request by the Commission.

Signature

Date

Due to rising costs associated with issuing a refund, it is the policy of the Idaho Real Estate Commission to refund overpayments of under \$25 only if requested in writing within 30 days of the Commission's receipt of the overpayment. Overpayments of \$25 or more will be automatically refunded to the licensee. There will be a \$15 fee assessed for each check returned to the Commission for insufficient funds.